

Zephyr Point Chamber Music Camp

2017 Registration Form

Name _____ Parent's Name (if under 18) _____
 Street Address _____
 City, State, Zip _____
 Email Address _____
 Phone (h) _____ (w) _____ (cell) _____

Please list all family members coming to camp (performers and non-performers) and fill in or check the appropriate information boxes. **Note:** Children under the age of 14 **must** be accompanied by an adult.

Name	Instrument	Age at camp	Session 1	Session 2	Perf. 13 & up	Perf. 4-12	Non-perf. 13 & up	Non-perf. 4-12	Cost see reverse

Additional cost of special meal requests*: _____

Total cost: _____

***Vegetarian and vegan meals are available for an additional fee.** Please add \$19 to your tuition total for each Session 1 participant and \$14 for each Session 2 participant requesting special meals, as the Conference Center charges us that additional amount. The Center will try to honor other requests, such as gluten-free, lactose free, etc.

vegetarian ____ # vegan ____ Other requests and **food allergies:** _____

Private teacher: _____ Email: _____ Phone: _____

List the 2 most recent solo pieces studied:

List ensemble repertoire studied recently:

Note: Please sign and date the reverse side and return with your deposit check.

A deposit of \$50 per person is due with registration. The camp will accept applicants based on the availability of an appropriate ensemble on a first-come, first-served basis. Deposit becomes non-refundable upon notification of acceptance. Balance must be paid by May 1, or within one week of acceptance, after May 1. **Applications will be accepted after May 1 if space allows**, but early registration is recommended! A \$50 discount applies when fees are paid in full by January 31!

Cancellation & Refund Policy: After May 1, no refunds will be given unless a replacement camper is found. *This applies to both performing and non-performing campers.* If a replacement camper is found by June 1, all payments except for the deposits will be refunded. After June 1, no refunds will be given.

I understand and agree to the above policies.

Signed _____ Print Name _____ Date _____

Mail registration and deposit check made out to the **Villa Sinfonia Foundation** to:
Carol Rice, 52 Manor Dr., San Francisco, CA 94127.

For further information, email carolrice@villasinfonia.org.

2017 Camp Fees*

Session 1: June 25-July 2

(7 nights and 20 meals)

Performer (13 & up) \$925/\$875*

Non-performer (13 & up) \$750/\$700*

Non-performer (4-12) \$675/\$625*

Session 2: July 2-7

(5 nights and 14 meals)

Performer (13 & up) \$800/\$750*

Performer (4-12) \$750/\$700*

Non-performer (13 & up) \$550/\$500*

Non-performer (4-12) \$425/\$375*

Session 1 & 2: June 25-July 7

(12 nights and 34 meals)

Performer (13 & up) \$1,600/\$1,550*

Non-performer (13 & up) \$1,300/\$1,250*

Non-performer (4-12) \$1,100/\$1,050*

* **If paid by January 31, camp fees are reduced by \$50.** Fees include room, board, instructional and administrative fees. Room and board costs are determined by the Conference Center, with guests age 13 and older charged adult rates.